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FM AMEMBASSY RANGOON
TO RUEHC/SECSTATE WASHDC PRIORITY 7986
INFO RUCNASE/ASEAN MEMBER COLLECTIVE
RUEHGG/UN SECURITY COUNCIL COLLECTIVE
RUEHBY/AMEMBASSY CANBERRA 1398
RUEHNE/AMEMBASSY NEW DELHI 4920
RUEHUL/AMEMBASSY SEOUL 8482
RUEHKO/AMEMBASSY TOKYO 6049
RHHMUNA/CDR USPACOM HONOLULU HI
RUEHGV/USMISSION GENEVA 3941
RHEHNSC/NSC WASHDC
RUCNDT/USMISSION USUN NEW YORK 1903
RUEKJCS/SECDEF WASHDC
RUEHBS/USEU BRUSSELS
RUEKJCS/JOINT STAFF WASHDC

C O N F I D E N T I A L RANGOON 000607

SIPDIS

STATE FOR EAP AND IO; PACOM FOR FPA

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TAGS: [PGOV](#) [PREL](#) [PHUM](#) [BM](#)

SUBJECT: PRIVATE KAREN GROUP PROVIDES STORM VICTIMS CARE

Classified By: Pol Officer Chelsia Wheeler for Reasons 1.4 (b) & (d)

¶1. (C) Summary. The Karen Medical Consortium (KMC) used funds from several donors, including Embassy Rangoon, to treat over 1,200 cyclone victims for medical problems in the aftermath of Cyclone Nargis. In their four trips to the delta region in which they visited fourteen villages, 60 percent of their patients were women and 13 percent were children under age twelve. In addition to medical care, they provided food rations, tube wells, and boats to villages in hopes of restarting the villagers' livelihoods and getting them on the road to recovery. End Summary.

¶2. (C) In late May and early June, the Karen Medical Consortium (KMC) - a private coalition of local health care providers - provided medical care to over 1,200 victims of Cyclone Nargis in the Irrawaddy Delta region. Nant Khin Aye Oo, the coordinator of the trips, told us that the KMC had received a total of USD 35,897 in funding and significant in-kind donations to support their work. Embassy Rangoon provided USD 13,897 from its small grants program to fund 39 percent of KMC's medical services. Pharmaceutical companies from Singapore provided in-kind donations, and the remainder of the funding came from local Burmese organizations and individuals.

¶3. (SBU) Nant Khin Aye Oo explained that the group took four trips to the delta region and treated patients in fourteen villages. They also provided local medical practitioners, such as midwives and nurses, with a six-month supply of basic medicines. Women comprised 60 percent of KMC's patients, and 13 percent were children under the age of twelve, she explained. The greatest number of complaints were minor colds and mild diarrhea. Twenty-one percent of the patients, however, had respiratory tract infections, she said. Other complaints were hypertension, minor injuries, and skin infections. These trends track with those from our discussions with other local groups and INGOs in Burma.

¶4. (SBU) In addition to its medical work, the KMC donated emergency food rations that it had designed and manufactured, tube wells, and fishing boats to villagers so that they can have access to food, clean water and a new start for their livelihoods. The work, however, is far from finished, asserted Nant Khin Aye Oo. She worried about donor fatigue, and explained that there is still a great need for long-term help. People need to rebuild their permanent homes and

restart their livelihoods. She told us that the KMC wants to train nurses from among cyclone victims in the delta region. This way, she said, the newly trained nurses could earn a living and provide the medical care that these communities will require well into the future.

15. (C) Comment: The Karen Medical Consortium provides just one example of how Embassy Rangoon has helped private local organizations provide assistance to cyclone victims and build up their own capacity in the process. Their work, and that of other local groups working in the delta region, demonstrates that there are private Burmese who are willing and capable of providing much-needed assistance to their fellow citizens, in stark contrast to the regime's neglect. These private Burmese, and many others like them, plan to continue their work in the months and years ahead. We should commit ourselves to supporting them and the Burmese people.
End Comment.
VILLAROSA